



Asia Pacific Region

World Association  
of Girl Guides  
and Girl Scouts

Association mondiale  
des Guides et des  
Eclaireuses

Asociación  
Mundial de las  
Guías Scouts

## ASIA PACIFIC REGION PROJECT “REACH OUT” APPLICATION FORM 2016

To be completed and returned by 30 November of each year to:  
Asia Pacific Regional (APR) Committee, WAGGGS

### 1. GENERAL INFORMATION

*If the project is applied by more than one MO, please list and describe all of them.*

1.1	Name of National Organization applying the Project.
1.2	Total population of the country (female adult members and girls & young women under the age of 30)
1.3	Brief outline of Girl Guiding/Girl Scouting programme offered by Member Organization for adult and girls and young women under the age of 30 (no more than 200 words)
1.4	Membership census of Member Organization

### 2. DESCRIPTION OF THE PROJECT

2.1	Title of Project
2.2	What are the goals and objectives of the project?
2.3	What are the expected results?

2.4	What are the planned project activities?  
2.5	Project is conducted at which level? (National, Regional, Province, State etc)  
2.6	Proposed location/s of project  
2.7	What is the participant age range in this project?  
2.8	What is the number of the expected beneficiaries (direct and indirect)?  
2.9	What is the expected date of commencement?  
2.10	What is the expected duration of the project?  
2.11	Who are the partners of your project (if any)?  
2.12	How will the project be implemented? Show this using a work plan. Highlight the expected outcomes in 3 months, 6 months, 9 months and 12 months.  
2.13	What contribution will the Member Organization provide; such as funding, staffing, resources?  
2.14	How will the project be monitored?  

**3. BUDGET**

Attach separately a detailed budget showing estimated cost (including breakdown of all expenses) of each activity/step of the project and estimated income (including contribution by Member Organization and other sources of income). Budget should ideally been shown in local currency and/or GBP. Please indicate whether the income has already been raised or promised.

**4. PERSON RESPONSIBLE FOR THE IMPLEMENTATION OF THE PROJECT**

4.1	Name :
4.2	Position in Organization:
4.3	Contact details (office phone number, mobile phone number and email address) :

**5. Other Comments**

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**6. Project Application Authorisation**

<b>Name of Person writing and submitting this Project Application</b>	
<b>Signature</b>	
<b>Position/Role of Nominating Person</b>	
<b>Date</b>	